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** CONTINUING DATA *****

This application is a CON of 09/171,169 10/14/1998
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 and is a CIP of 08/797,472 02/06/1997 PAT 5,900,407

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/19/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NC	SHEETS DRAWING 2	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
Verified and Acknowledged	 Examiner's Signature	 Initials			

ADDRESS

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TITLE

Method of treating dry eye disease with purinergic receptor agonists

☐ All Fees

☐ 1.16 Fees (Filing)

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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